| nonprovisional NO \$1370 \$300 \$1670 01/21/2005 EXAMINER ART UNIT CLASS-SUBCLASS HARVEY, DIONNE 2643 381-349000 Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | APPLN. TYPE | E SMALL ENTITY ISSUE F | | FEE PUBLICATION FEE | | TOTAL FEE(S) DUE | | DATE DUE | |
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| FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is Edwards & Angell, | HARVEY | , DIONNE | 2643 | | 381-349000 | | • | | |
| | FR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 | dence address (or Change of 122) attached. | Correspondence | (1) the nor agents (2) the nor registered 2 register | ames of up to 3 registered patent OR, alternatively, ame of a single firm (having as a l attorney or agent) and the name red patent attorneys or agents. If r | member a | 2 Steven | n M. Jensen | |
| | PLEASE NOTE: Unles | s an assignee is identified b | elow, no assignee | data will ap | pear on the patent. If an assigne | ee is identifi | ied below, the d | ocument has been filed | |

recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

Steven M. Jensen

(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE ☐ Individual ☐ Corporation or other private group entity ☐ Governm Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number (enclose an extra copy of this form). Advance Order - # of Copies _ Deposit Account Number 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office. 1/14/05 Authorized Signature

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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| Effective on 12/08/2 Fees pursuant to the Consolidated Appropri | | Application Number | 09/839,945 | | |
| FEE TRANSI | MITTAI | Filing Date | April 19, 2001 | | |
| • | | First Named Inventor | Jen-Hui Tsai | | |
| For FY 20 | 05 | Examiner Name | D. Harvey | | |
| X Applicant claims small entity statu | is. See 37 CFR 1.27 | Art Unit | 2643 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 1,009.00 | Attorney Docket No. | 55841(71987) | | |
| METHOD OF PAYMENT (check | all that apply) | | | | |

| Check | Credit C | ard : | Money Order | None | Other (| please identi | fy): | | |
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| X Deposit Ac | count | Deposit Account | Number: 04- | 1105 D | eposit Account Nar | me: | Edwards & A | Angell, LLI | Ρ |
| For the | above-identi | ified deposit | account, the D | irector is he | reby authorize | ed to: (chec | k ali that apply) | | |
| x Cr | narge fee(s) | indicated be | elow | | Charge | e fee(s) indi | cated below, ex | cept for th | ne filing fee |
| | | dditional fee | (s) or underpay and 1.17 | ment of | x Credit | any overpa | yments | | |
| FEE CALCUL | ATION | - | | | | | | | |
| 1. BASIC FILING | G, SEARCH | I, AND EXA | MINATION FE | | | | | | |
| | | FILIN | IG FEES | SEAR | CH FEES Small Entity | EXAMIN | ATION FEES Small Entity | | |
| Application Ty | уре | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees F | Paid (\$) |
| Utility | | 300 | 150 | 500 | 250 | 200 | 100 | | |
| Design | | 200 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | | 200 | 100 | 300 | 150 | 160 | 80 | | |
| Reissue | | 300 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLA | AIM FEES | | | | | | | | Small Entity |
| Fee Description | | | | | | | | Fee (\$) | <u>Fee (\$)</u> |
| Each claim over | • | - | • | | | | | 50 | 25 |
| Each independe | | er 3 (includi | ng Reissues) | | | | | 200 | 100 |
| Multiple depend | dent claims | | | | | | | 360 | 180 |
| Total Claims | Extra | Claims | | Fee Paid | 1 (\$) | | ltiple Depende | | |
| | - 20 = | × - | = _ | | | Fee | <u>= (\$)</u> | Fee Paid (\$ | য |
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| 3. APPLICATIO | | | | | | | | | |
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| listings und | ler 37 CFR | 1.52(e)), the | application siz | ze fee due is | s \$250 (\$125 f | for small en | tity) for each a | dditional 5 | 0 |
| | | | J.S.C. 41(a)(1) | | | | | _ | D. 1.1.(6) |
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| | | | 1504 Publica | ition fee fo | r early, volur | tary, or no | omal | 30 | 00.00 |
| SUBMITTED BY | | | | | | | | | |
| Signature | Thu | Jem | _ | | gistration No. torney/Agent) | 42,693 | Telephone | (617) 43 | 9-4444 |
| Name (Print/Type) | Steven M | I. Jensen | | | | <u> </u> | Date | January 1 | 14, 2005 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV438968599US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 14, 2005

Marcus) Signature: